

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1146 / 10281

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

ActBlue

A. Full Name (Last, First, Middle Initial) Edwina Cross Mailing Address 1280 North Mountain Ave. City Ashland State OR Zip Code 97520 FEC ID number of contributing federal political committee. C Name of Employer self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 27.50		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Transaction ID: SA11A1_641600 Amount of Each Receipt this Period 2.50 Contribution to Act Blue
B. Full Name (Last, First, Middle Initial) Edwina Cross Mailing Address 1280 North Mountain Ave. City Ashland State OR Zip Code 97520 FEC ID number of contributing federal political committee. C Name of Employer self Occupation Writer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 27.50		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Transaction ID: SA11A1_641599 Amount of Each Receipt this Period 25.00 Earmark Contribution Earmark To: DRAFT GORE
C. Full Name (Last, First, Middle Initial) kevin crotty Mailing Address 519 taylor street City lexington State VA Zip Code 24450 FEC ID number of contributing federal political committee. C Name of Employer washington and lee Occupation professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7 Transaction ID: SA11A1_649900 Amount of Each Receipt this Period 400.00 Earmark Contribution Earmark To: NOVICK FOR SE-NATE

SUBTOTAL of Receipts This Page (optional)**427.50****TOTAL** This Period (last page this line number only)